

## **CHOATE, HALL & STEWART**

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# **EXCHANGE PLACE 53 STATE STREET**

### BOSTON, MASSACHUSETTS 02109-2891

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Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Express Mail No.: EL744195790US Attorney Docket No.: 0263421-0042 Date Filed: September 9, 2003

(for new nonprovisional applications under 37 C.F.R. § 1.53(b))					
Dear Sir:					
Please find enclosed	a patent application and p	apers as follows for:			
Inventor(s):					
Given Name (first and middle)	Family Name or Surname	Residence (City and State or Foreign Country)			
Robert	Lombari	North Smithfield, RI			
Wei-Chiao	Lo	Taya-hsing, Taichung, Taiwan			
Title of the Invention: Tube	ular Diaphragm Tank				
A) APPLICATION ELEM	ENTS:				
1) 🗌 Fee Transmi	ttal Form (original and o	duplicate submitted for fee processing)			
2) 🗌 Applicant Cl	aims Small Entity Status	s (see 37 C.F.R. § 1.27)			

a) 
Statement Verifying Small Entity Status (optional)

	Descriptive Title of the Invention Cross References to Related Application Statement Regarding Federally Sponsor Reference to sequence listing, a table, or Background of the Invention Summary of the Invention Description of the Drawing (if filed) Detailed Description of the Invention Claim(s) Abstract of the Invention	red R & D (if applicable)		
4) 🛭 Dra	awing(s) (35 U.S.C. § 113)	TOTAL SHEETS: 3		
a)	☐ Formal Drawings (if checked)			
5) 🗌 Oa	th or Declaration	TOTAL PAGES:		
a)	☐ Newly Executed (original or copy)			
b) Copy from a prior application (37 C.F.R. § 1.63(d))-for continuation/divisional application				
	i) Deletion of inventor(s): Signed State in the prior application, see 37 C.F.			
c)	☐ Unexecuted			
6) [] <b>Ap</b>	plication Data Sheet. See 37 C.F.R. § 1.	76.		
	-ROM or CD-R in duplicate, large tab Appendix)	de or Computer Program		
•	cleotide and/or Amino Acid Sequence secessary)	Submission (if applicable, all are		
a)	Computer Readable Form (CRF)			
b)	☐ Specification Sequence Listing on:			
	i) CD-ROM or CD-R (2 copies)	; or		
	ii) 🗌 Paper			
c)	☐ Statements verifying identity of above	ve copies		

B) ACCOMPANYING APPLIC	ATION PARTS:			
9) 🔲 Assignment Pape	ers (cover sheet & documen	$\operatorname{at}(s)$		
10) 🔲 37 C.F.R. § 3.73(	(b) Statement (when there	is an assignee)		
11) D Power of Attorn	ey			
12) 🔲 English Translat	tion Document (if applicab	le)		
13) [ Information Disc	closure Statement (IDS)/P	TO-1449		
14) Copies of IDS Ci	itations			
15) 🔲 Preliminary Am	endment			
16)  Return Receipt Postcard (MPEP 503) (specifically itemized)				
17) Certified Copy of Priority Document(s) (if foreign priority is claimed)				
18)  Nonpublication Request under 35 U.S.C. § 122(b)(2)(B)(i)				
19)   OTHER: (if applicable, specified below)				
C) FOR CONTINUING APPLICATIONS: (the appropriate box is checked, and certain information is provided below and in a preliminary amendment)				
☐ continuation	☐ divisional	continuation-in-part (CIP)		
of prior application no.: filed:				
examiner:				
group/art unit:				
application, from which a	n oath or declaration is supp the accompanying continua	The entire disclosure of the prior plied as detailed above, is considered ation or divisional application and is		

## D.) PRIORITY CLAIM(S):

This application claims the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States of America listed below:

Status (patented, pending, abandoned) Application Serial No. Filing date

This application claims the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

Application Serial No. Filing date Status (pending, expired, abandoned)

### E) METHOD OF PAYMENT OF FILING FEES FOR THIS APPLICATION:

- Applicant claims small entity status 37 C.F.R. § 1.27.
- ☑ A check for \$750.00 is enclosed to cover the filing fees.
- ☑ The commissioner is hereby authorized to charge filing fees or to credit any overpayment to deposit account number 03-1721.

Basic Filing Fee (Large Entity)	\$750.00
Additional Fees:	
Total Number of Claims in excess of 20: (18–20) x \$18	\$0.00
Number of Independent Claims in excess of 3:(3–3) x \$84	\$0.00
Multiple Dependent Claims \$280:	<u>\$0.00</u>
Total Filing Fee:	\$750.00

## F) CORRESPONDENCE ADDRESS:

PATENT TRADEMARK OFFICE

☐ Correspondence Ac :ess:

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Respectfully Submitted,

Valarie B. Rosen

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